

COUNTY OF OAKLAND
NOTICE OF PRIVACY PRACTICES

**THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED
AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.**

PLEASE REVIEW IT CAREFULLY.

This Notice of Privacy Practices is being provided to you as a requirement of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). HIPAA requires that the County of Oakland (County) maintain the privacy of your protected health information (PHI) and provide you with this Notice, detailing the legal duties and privacy practices of the County with respect to your PHI. This notice describes how the County may use and disclose your PHI to carry out treatment, payment, or health care operations, and for other purposes that are permitted or required by law. PHI is information about you, including demographic data, that can reasonably be used to identify you and that relates to your past, present or future physical or mental health, the provision of health care to you or the payment for that care.

In this notice, it is explained how the privacy of your PHI is protected and how it will be allowed to be used and given out (“disclosed”). The County must follow the privacy practices described in this notice while it is in effect. This notice takes effect April 14, 2003 and will remain in effect until the County replaces or modifies it.

The County reserves the right to change its privacy practices and the terms of this notice at any time, provided that applicable law permits such changes. These revised practices will apply to your PHI regardless of when it was created or received. Any revised Notice will be transmitted to you via inter-county mail, or via U.S. Mail if you have retired and it will be posted on the County website at www.oakgov.com/hr/benefits.

Uses and Disclosures of Protected Health Information

The County must have your written authorization to use and disclose your PHI, except for the following uses and disclosures:

- **To You and Your Personal Representative:** The County may disclose your PHI to you or to your personal representative (someone who has the legal right to act for you).
- **For Treatment:** The County may use and disclose your PHI to health care providers (doctors, dentists, pharmacies, hospitals and other caregivers) who request it in connection with your treatment. For example, the County may disclose your PHI to health care providers in connection with disease and case management programs.
- **For Payment:** The County may use and disclose your PHI for its payment-related activities and those of health care providers and health insurance plans, including for example:
 - Obtaining premiums and determining eligibility for benefits
 - Paying claims for health care services that are covered by your health plan
 - Responding to inquiries, appeals and grievances
 - Coordinating benefits with other insurance you may have

- **For Health Care Operations:** The County may use and disclose your PHI for possible health care operations, including for example:
 - Conducting quality assessment and improvement activities, including peer review, credentialing of providers and accreditation
 - Performing outcome assessments and health claims analyses
 - Preventing, detecting and investigating fraud and abuse
 - Underwriting, rating and reinsurance activities
 - Coordinating case and disease management activities
 - Communicating with you about treatment alternatives or other health-related benefits and services
 - Performing business management and other general administrative activities, including systems management and customer service

The County may also disclose your PHI to health providers and health plans who have a relationship with you for certain of their health care operations. For example, the County may disclose your PHI for their quality assessment and improvement activities or for health care fraud and abuse detection.

- **To Others Involved in Your Care:** The County may under certain circumstances disclose to a member of your family, a relative, a close friend or any other person you identify, the PHI directly relevant to that person's involvement in your health care or payment for health care. For example, the County may discuss a claim determination with you in the presence of a friend or relative, unless you object.
- **When Required by Law:** The County will use and disclose your PHI if it is required to do so by law. For example, it will use and disclose your PHI in responding to court and administrative orders and subpoenas, and to comply with workers' compensation laws. It will disclose your PHI when required by the Secretary of Health and Human Services or state regulatory authorities.
- **For Matters in the Public Interest:** The County may use or disclose your PHI without your written permission for matters in the public interest, including for example:
 - Public health and safety activities, including disease and vital statistic reporting, child abuse reporting, and Food and Drug Administration oversight
 - Reporting adult abuse, neglect, or domestic violence
 - Reporting to organ procurement and tissue donation organizations
 - Averting a serious threat to the health or safety of others
- **For Research:** The County may use your PHI to perform select research activities, provided that certain established measures to protect your privacy are in place.
- **To Our Business Associates:** From time to time the County engages third parties to provide various services for it. Whenever an arrangement with such a third party involves the use or disclosure of your PHI, the County will have a written contract with that third party designed to protect the privacy of your PHI. For example, the County may share your information with business associates who process claims or conduct disease management programs on its behalf.
- **To Group Health Plans and Plan Sponsors:** Other plans, and the employers or other entities that sponsor them, may receive PHI from the County in the form of enrollment information.

Certain plans and their sponsors may receive additional PHI from the County. Whenever the County discloses PHI to plans or their sponsors, they must follow applicable laws governing use and disclosure of your PHI.

Disclosures You May Request

You may instruct the County, and give your written authorization, to disclose your PHI to another party for any purpose. Your authorization is required to be on our standard form.

Individual Rights

You have the following rights. To exercise these rights, you must make a written request on the County's standard form.

- **Access:** With certain exceptions, you have the right to look at or receive a copy of your PHI contained in the group of records that are used by or for the County to make decisions about you, including our enrollment, payment, claims adjudication, and case or medical management notes. The County reserves the right to charge a reasonable cost-based fee for copying and postage. If you request an alternative format, such as a summary, the County may charge a cost-based fee for preparing the summary. If your request for access is denied, the County will tell you the basis for its decision and whether you have a right to further review.
- **Disclosure Accounting:** You have the right to an accounting of certain disclosures of your PHI, such as disclosures required by law. This accounting requirement applies to disclosures the County makes beginning on and after April 14, 2003. If you request this accounting more than once in a 12-month period, a fee may be charged covering the cost of responding to these additional requests.
- **Restriction Requests:** You have the right to request that the County place restrictions on the way it uses or discloses your PHI for treatment, payment or health care operations. The County is not required to agree to these additional restrictions; but if it does, the County will abide by them (except as needed for emergency treatment or as required by law) unless you are notified that the County is terminating the agreement.
- **Amendment:** You have the right to request that your PHI be amended in the set of records described above under Access. If your request is denied, the County will provide you a written explanation. If you disagree, you may have a statement of your disagreement placed in the County's records. If your request to amend the information is accepted, reasonable efforts will be made to inform others, including individuals you name, of the amendment.
- **Confidential Communication:** The County communicates decisions related to payment and benefits, which may contain PHI, to the subscriber. Individual members who believe that this practice may endanger them may request that the County communicate with them using a reasonable alternative means or location. For example, an individual member may request that an Explanation of Benefits be sent to a post office box instead of to the subscriber's address.

Questions and Complaints

If you want more information about the County's privacy practices, or to make a request as outlined above, please contact:

Employees: Employee Benefits Unit, Department of Human Resources, County of Oakland, 2100 Pontiac Lake Rd, BLD 41W Dept 440, Waterford, MI 48328 Telephone (248) 858-0545

Retirees: Retirement Unit, Department of Human Resources, County of Oakland, 2100 Pontiac Lake Rd, BLD 41W Dept 440, Waterford, MI 48328 Telephone (248) 858-0545

For your convenience, you may also obtain an electronic (downloadable) copy of this notice online at www.oakgov.com/hr/benefits.

If you are concerned that the County may have violated your privacy rights, or you believe that it has inappropriately used or disclosed your PHI and you want to file a complaint, contact the one of the two units listed above.

If you believe that your privacy rights have been violated, you have the right to file a complaint with the federal government at:

Office of Civil Rights, Department of Health and Human Services, 200 Independence Avenue, Washington, DC 20201 Telephone (886) 627-7748

This Notice is consistent with standard established under 42 CFR, Part 2; 45 CFR, parts 160 and 164; and Michigan Law.

Notice to Plan Participants - Notice of Privacy Practices Available

The U.S. Department of Health and Human Services has issued regulations as part of the Health Insurance Portability and Accountability Act of 1996. These regulations, known as the Standards for Privacy of Individually Identifiable Health Information, were effective on April 14, 2003 (or April 14, 2004 for small health plans) and control how your medical information may be used and disclosed and how you can access this information. Please be advised that your health benefits plans maintain a current Notice of Privacy Practices to inform you of the policies that they have established to comply with the Standards for Privacy. This Notice describes the responsibilities of the plans and any third party assisting in the administration of claims regarding the use and disclosure of your protected health information, and your rights concerning the same.

This Notice is available to you upon request by contacting your company's Privacy Official or Human Resources Director.